are amanita muscaria, deadly night shade, Jerusalem cherry, jimson weed and lantana.

The clinical picture of toxicity consists of:

Central effects—hyperactivity, delirium hallucinations, disorientations and seizures, coma and death.

Peripheral effects—dilated pupils, vasodilatation (flush) hyperpyrexia, tachycardia, secretion of saliva and sweat, secretions in pharynx and bronchi, urinary retention, serious cardiac arrhythmias.

Administration of physostigmine, an anticholinesterase, dramatically reverses both the central and peripheral effects of these anticholinergic substances, including the cardiac arrhythmias. The initial pediatric dose is 0.5 mg and dosage is slowly increased at five-minute intervals to a maximum dose of 2 mg. The adult dose is 2 mg and it is slowly increased to 4 mg.

Physostigmine is rapidly metabolized and repeated therapeutic doses may be necessary at 30 to 60 minute intervals as symptoms recur.

If toxic effects of physostigmine appear, atropine in a dose half that of physostigmine can be used to reverse these effects.

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Alcohol and Adolescents

THERE HAS BEEN an increase in consumption of alcohol and the consequent problems associated with alcoholic intoxication in children and teenagers. Alcohol-related automobile accidents involving adolescents are increasing. Because of advertising's youth-oriented message, alcohol, beer and wine have been made especially attractive to teenagers. Some of the young drink for social reasons such as peer acceptance, curiosity and experimentation. Others use alcohol as selfmedication to relieve tension and anxiety. Selfmedication paves the way for drug abuse and alcoholism.

Many families and cultural groups can use alcoholic beverages responsibly. Low-risk groups of drinkers come from families that present a constant example of drinking in moderation without lecturing or preaching. These families have ground rules for using alcohol or not using it, agreed upon by all. Excessive drinking is not acceptable and overindulgence is not looked upon as comical.

Alcohol abuse is at times related to lack of self-esteem and the search for identity. In others, alcohol abuse becomes a way of reducing tension and anxiety when no positive outlet for this energy exists. The ability to deal productively with normal states of anxiety, tension and frustration is based on family patterns of coping that are developed through experience.

Physicians must be alert to family, social and personality problems of those at high risk. Early intervention by those who care for young children and adolescents will be more productive than therapy once alcoholism is established.

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Cytoxan and Future Sterility

THE USE OF cytotoxic agents in inflammatory diseases was limited in the early period of steroid therapy. As more efficacious and less toxic cytotoxic agents have been developed, they have been used widely in those diseases that cannot be controlled by steroids, such as steroid-resistant and steroid-dependent nephrosis.

Cytoxan[®] (cyclophosphamide) is the agent most extensively used. Cytoxan is a derivative of nitrogen mustard and has a wide spectrum of biologic activities, including its inhibitory effects on immune phenomena and anti-inflammatory mechanisms. Although this agent depresses gonadal functions in experimental animals, this effect was not generally appreciated in humans until 1972. Then Fairley and co-workers reported that Cvtoxan in daily doses of 50 to 100 mg had produced low sperm counts and azoospermia in 31 men. To date, there does not seem to be a permanent depression of ovarian function. Women treated with Cytoxan have delivered normal in-